

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	Ted	10	9-7-01
FORMALITY REVIEW		JC 1147	10/23/01
RESPONSE FORMALITY REVIEW	CHC	712	03-12-02

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 - ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	Original
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
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107 (mc)  
3/12/02

107  
3/12/02